

22883

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/728,701
		Filing Date	Dec 1, 2000
		First Named Inventor	Muhlestein, Mark
		Art Unit	2131
		Examiner Name	Abrishamkar, K.
Total Number of Pages in This Submission	21	Attorney Docket Number	103.1056.01

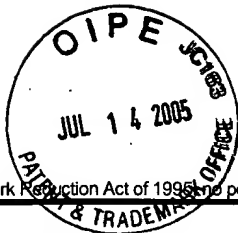
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (2 copies) <input checked="" type="checkbox"/> Fee Attached (PTO Form 238 - 2 copies) <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (2 copies) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Steven A. Swernofsky	Reg. No. 33,040
Signature		
Date	7-7-2005	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Type or printed name	DIDI STOLCE		
Signature		Date	7-7-2005

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22883

PTO/SB/17 (10-03)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1,020.00)

Complete if Known

Application Number 09/728,701

Filing Date 12/1/2000

First Named Inventor Muhlestein

Examiner Name Abrishamkar, K.

Art Unit 2131

Attorney Docket No. 103.1056.01

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account

Deposit Account Number

50-0365

Deposit Account Name

Swernofsky Law Group PC

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	2001	790	395	Utility filing fee	
1002	2002	350	175	Design filing fee	
1003	2003	550	275	Plant filing fee	
1004	2004	790	395	Reissue filing fee	
1005	2005	200	100	Provisional filing fee	

SUBTOTAL (1) (\$0.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	2202	50	25	Claims in excess of 20	
1201	2201	200	100	Independent claims in excess of 3	
1203	2203	360	180	Multiple dependent claim, if not paid	
1204	2204	200	100	**Reissue independent claims over original patent	
1205	2205	50	25	**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$0.00)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	2051	130	65	Surcharge - late filing fee or oath	
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet	
1053	2053	130	130	Non-English specification	
1812	2520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	2251	120	60	Extension for reply within first month	
1252	2252	450	225	Extension for reply within second month	
1253	2253	1,020	510	Extension for reply within third month	\$1,020.00
1254	2254	1,590	795	Extension for reply within fourth month	
1255	2255	2,160	1,080	Extension for reply within fifth month	
1401	2401	500	250	Notice of Appeal	
1402	2402	500	250	Filing a brief in support of an appeal	
1403	2403	1000	500	Request for oral hearing	
1451	2451	1,510	1,510	Petition to institute a public use proceeding	
1452	2452	110	55	Petition to revive - unavoidable	
1453	2453	1,370	685	Petition to revive - unintentional	
1501	2501	1,400	700	Utility issue fee (or reissue)	
1502	2502	800	400	Design issue fee	
1503	2503	1,100	550	Plant issue fee	
1460	2460	130	130	Petitions to the Commissioner	
1807	2807	50	50	Processing fee under 37 CFR 1.17(q)	
1806	2806	180	180	Submission of Information Disclosure Stmt	
8021	8021	40	40	Recording each patent assignment per property (times number of properties)	
1809	2809	790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	2810	790	395	For each additional invention to be examined (37 CFR 1.129(b))	
1801	2801	790	395	Request for Continued Examination (RCE)	
1802	1802	900	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$1,020.00)

SUBMITTED BY**Complete (if applicable)**

Name (Print/Type)	Steven A. Swernofsky	Registration No. (Attorney/Agent)	33,040	Telephone	650-947-0700
Signature	<i>SA Swernofsky</i>			Date	7-7-2005

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